## **ATTORNEY DOCKET 81055DMW** UTILITY PATENT APPLICATION Customer No. 01333 TRANSMITTAL UND 37 CFR 1.53(b) bel No. Express Mail **ਜੈ** o: Commissioner for Pa **Box Patent Application** EL486846405US Washington, D.C. 20231 Ø AN AGENT FOR INTEGRATED ANNOTATION ND RETRIEVAL OF IMAGES First Named Inventor (or Application Identifier): Henry Lieberman, et al Enclosed are: Assignment of the invention to X 6. 1. Specification Eastman Kodak Company Sheet(s) of drawing(s) 2. 7. Letter under Rule 53 document. Associate Power of Attorney Information Disclosure Statement Under 37 CFR 8. 3. Combined Declaration for Patent Application and Power of Attorney: 4. 4a. Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed) C) () () () 4b. Incorporation by Reference (useable if Box 4b is 5. Deletion of Inventor(s). Signed statement attached deleting inventor(s) named checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, in the prior application, see 37 CFR 1.63(d)(2) and Uī is considered as being part of the disclosure of the accompanying 1.33(b). application and is hereby incorporated by reference therein. If a 111A application prior to examination of the above-identified application, amend the specification at Page 1, after the title, by inserting the following: -- CROSS REFERENCE TO RELATED APPLICATION Ļ٤ Reference is made to and priority claimed from U.S. Provisional Application Serial No., C) filed, entitled. Ļ٤ If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: Continuation-in-part (CIP) 11. Continuation Divisional of prior application No:, Please address all written communications to Thomas H. Close, Patent Legal Staff, 12. Eastman Kodak Company, 343 State Street, Rochester, NY 14650-2201. Please Direct all telephone calls to David M. Woods at (716) 477-5256. The filing fee has been calculated as shown below: FEE FOR: NO. FILED NO. EXTRA RATE **BASIC FEE** \$ 710 **TOTAL CLAIMS** 30 - 20 = 10 x 18 =\$ 180 x 80 =- 3 = INDEPENDENT CLAIMS 3 0 \$0 \$0 +270MULTIPLE DEPENDENT CLAIM PRESENTED **TOTAL** \$ 890 Please charge my Eastman Kodak Company Deposit Account No. 05-0225 in the amount of 890. A duplicate copy of this sheet is enclosed The Commissioner is hereby authorized to charge any additional filing fees required under 37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. 05-0225. A duplicate copy of this sheet is enclosed. M. Wonds David M. Woods DMW/RGR

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